

HUMAN SERVICES DEPARTMENT[441]**Adopted and Filed**

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services amends Chapter 77, “Conditions of Participation for Providers of Medical and Remedial Care,” Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” and Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” Iowa Administrative Code.

The amendments add a new provider type to the Medicaid program. The purpose of the new provider type is to enroll public health agencies that provide immunizations and testing for communicable disease.

Increasingly, public health agencies are terminating their Medicaid enrollment as home health agencies (HHA). While HHAs can bill Medicaid for immunizations, many of these public health agencies do not qualify to enroll in Medicaid as another provider type which has services including immunizations and testing for communicable disease as covered services. These amendments will allow public health agencies to continue to provide services and bill Medicaid when the agencies are no longer eligible to provide home health services.

Notice of Intended Action was published in the Iowa Administrative Bulletin as **ARC 0231C** on July 25, 2012.

The Department received four comments, three from the public and one from the Iowa Department of Public Health (IDPH). The public comments noted that the reference standards referred to in the rule making, Iowa Code sections 135A.2(8) and 135A.6, may be voluntarily implemented by local public health agencies. Because implementation is voluntary, local public health agencies are not required to comply with standards established by IDPH. At this time, there are no local public health agencies in Iowa that have identified full implementation of the identified standards on a voluntary basis. Thus, inclusion of the statement in the rule making that local public health agencies comply with standards as identified in Iowa Code sections 135A.2(8) and 135A.6 would eliminate 100 percent of the local public health agencies from eligibility to participate as providers for immunizations and testing of communicable disease. IDPH recommended that the reference within the rule making be changed to 641—subrule 77.3(3) to address this concern. The Department concurred with the comments and has changed the reference in new rule 441—77.42(249A).

The Council on Human Services adopted these amendments on September 12, 2012.

These amendments do not provide for waivers in specified situations because the amendments confer a benefit on public health agencies that provide immunizations and testing for communicable disease. Requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 249A.4.

These amendments will become effective November 7, 2012.

The following amendments are adopted.

ITEM 1. Adopt the following new rule 441—77.42(249A):

441—77.42(249A) Public health agencies. Public health agencies are eligible to participate in the medical assistance program when they serve as a public health entity within the local board of health jurisdiction pursuant to 641—subrule 77.3(3).

This rule is intended to implement Iowa Code section 249A.4.

ITEM 2. Adopt the following new rule 441—78.48(249A):

441—78.48(249A) Public health agencies. Payments will be made to public health agencies on a fee schedule basis for providing vaccine and vaccine administration and testing for communicable disease. In order to be paid for the administration of a vaccine covered under the Vaccines for Children (VFC)

program, a public health agency must enroll in the VFC program. Payment for the vaccine will be approved only if the VFC program stock has been depleted.

This rule is intended to implement Iowa Code section 249A.4.

ITEM 3. Amend subrule **79.1(2)** by adopting the following new provider category in alphabetical order:

<u>Provider category</u>	<u>Basis of reimbursement</u>	<u>Upper limit</u>
Public health agencies	Fee schedule	Fee schedule rate.

ITEM 4. Adopt the following new subparagraph **79.3(2)“d”(41)**:

(41) Services of public health agencies:

1. Service or office notes or narratives.
2. Immunization records.
3. Results of communicable disease testing.

[Filed 9/12/12, effective 11/7/12]

[Published 10/3/12]

EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 10/3/12.